

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPR	ROVAL
OMB Number:	3235-0076
Expires: .	April 30, 2008
Estimated aver	age burden

SE	C USE ON	LY
Prefix		Serial
D/	ATE RECEIVI	ED
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hours per response...... 16.00

Name of Offering(check if this is an amendment Series B Preferred Stock Financing	and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rul Type of Filing: New Filing Amendment	504 Rule 505 Rule 506 Section 4(6)	PROCESSED
	A. BASIC IDENTIFICATION DATA	NOV 1 7 2006
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment Consorte Media, Inc.	and name has changed, and indicate change.)	THOMSON FINANCIAL
Address of Executive Offices 220 Montgomery Street, Suite 940, San France	(Number and Street, City, State, Zip Code) isco, CA 94104	Telephone Number (Including Area Code) (650) 677-4461
Address of Principal Business Operations (if different from Executive Offices) Same as above	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business Direct marketing services	-	NOV 1 3 2006
	partnership, already formed other (p	please specify):
N.*	1-1-1 1-1-1	
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of secur 77d(6).	ities in reliance on an exemption under Regulation D or	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 and Exchange Commission (SEC) on the earlier of the which it is due, on the date it was mailed by United S	date it is received by the SEC at the address given be	A notice is deemed filed with the U.S. Securities flow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commi	ssion, 450 Fifth Street, N.W., Washington, D.C. 2054	9.
Copies Required: Five (5) copies of this notice must photocopies of the manually signed copy or bear type	be filed with the SEC, one of which must be manually d or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all thereto, the information requested in Part C, and any m not be filed with the SEC.	information requested. Amendments need only report aterial changes from the information previously suppli	the name of the issuer and offering, any changes ied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	1	
State: This notice shall be used to indicate reliance on the ULOE and that have adopted this form. Issuers rely are to be, or have been made. If a state requires the accompany this form. This notice shall be filed in t this notice and must be completed.	ing on ULOE must file a separate notice with the Si payment of a fee as a precondition to the claim for the appropriate states in accordance with state law.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the

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American LegalNet, Inc. www.USCourtForms.com

filing of a federal notice.

A. BASIC IDENTIFICATION DATA		· · · · · · · · · · · · · · · · · · ·
2. Enter the information requested for the following:		
• Each promoter of the issuer, if the issuer has been organized within the past five years;		
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% 	or more of a class	of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corporate general and managing	partners of partner	ship issuers; and
Each general and managing partner of partnership issuers.		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Morga, Alicia		
Business or Residence Address (Number and Street, City, State, Zip Code) 220 Montgomery Street, Suite 940, San Francisco, CA 94104		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Jones, Greg		
Business or Residence Address (Number and Street, City, State, Zip Code) 747 Hillcrest Way, Emerald Hills, CA 94062		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director .	General and/or Managing Partner
Full Name (Last name first, if individual) Dalal, Yogen		
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mayfield XII, 2800 Sand Hill Road, Suite 250, Menlo Park, CA 94025		· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Palihapitiya, Chamath		
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Mayfield XII, 2800 Sand Hill Road, Suite 250, Menlo Park, CA 94025		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Mayfield XII, L.P		
Business or Residence Address (Number and Street, City, State, Zip Code) 2800 Sand Hill Road, Suite 250, Menlo Park, CA 94025		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Band of Angels Fund, L.P		
Business or Residence Address (Number and Street, City, State, Zip Code) 275 Middlefield Road, Menlo Park, CA 94025		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		

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	•	,								·		Yes	No
1.	Has th	e issuer solo	l, or does th	ne issuer inte	end to sell,	to non-accr	edited invest	tors'in this o	offering?				\boxtimes
		,			!		ımn 2, if fili	-					
2.	What	is the minim	um investn	nent that wil	l be accept	ed from any	individual?	***************************************				\$ <u>N/A</u>	
					+		,					Yes	No
3. 4.	Does t	the offering	permit join	t ownership sted for eacl	of a single	unit? bo boo boo	n ar urill ha		dimanti				. Ц
4.				eration for s									
	If a pe	rson to be li	sted is an a	ssociated pe	rson or age	nt of a brok	er or dealer	registered v	with the SE	C and/or wi	th a state		
				broker or de et forth the i					are associ	ated person	s of such		
Full	Name	(Last name	first, if indi	vidual)							•	•	
Busi	ness of	Residence	Address (N	lumber and S	Street, City,	State, Zip	Code)						
Nam	e of A	ssociated Br	oker or De	aler	1					:			
State	es in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers	•					
	(Ch	eck "All Sta	tes" or chec	ck individua	States)					<i>.</i>		🗖 A	All States
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Full	Name ((Last name f	irst, if indi	vidual)		•	•	•	•	•	T.		
Busi	ness or	Residence /	Address (N	umber and S	Street, City,	State, Zip	Code)						, ,==
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price . Sold Debt\$ Equity.....\$ 3,250,000.00 \$ 3,173,539.86 Common Preferred Convertible Securities (including warrants).....\$ Partnership Interests _______ \$ ____ \$ ____ Other (Specify _______ \$ ______ Total \$ 3,250,000.00 \$ 3,173,539.86 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount . Investors of Purchases Accredited Investors.... \$ 3,173,539.86 N/A \$ Non-accredited Investors Total (for filings under Rule 504 only)..... N/A \$ -____ N/A Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of Offering Security Sold \$ _____ Regulation A N/A \$ N/A N/A Total N/A N/A Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

 Transfer Agent's Fees
 \$ 0

 Printing and Engraving Costs
 \$ 0

 Legal Fees
 \$ 50,000.00

 Accounting Fees
 \$ 0

 Engineering Fees
 \$ 0

 Sales Commissions (specify finders' fees separately)
 \$ 0

 Other Expenses (identify)
 Form D filling fees
 X 5 600.00

 Total
 X 5

	t contract the contract to the						
b. Enter the difference between the aggreg and total expenses furnished in response to P proceeds to the issuer."	Part C - Question 4.a. This difference	is the "adjusted gross	S		\$	3,199,4	100.00
indicate below the amount of the adjusted geach of the purposes shown. If the amount check the box to the left of the estimate. The proceeds to the issuer set forth in response	nt for any purpose is not known, fur ne total of the payments listed must eq	nish an estimate an	d			•	•
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Salaries and fees			Пs	0		5	(
Purchase of real estate	1		_			<u> </u>	
Purchase, rental or leasing and installation	•		↓				
and equipment			\$_	0		s	
Construction or leasing of plant buildings	and facilities	•••••	□ s	0		s	(
Acquisition of other businesses (including offering that may be used in exchange for	the value of securities involved in the assets or securities of another	his					
issuer pursuant to a merger)			□ \$_	0		<u> </u>	- 0
Repayment of indebtedness							
Working capital	· .						
Other (specify):			.∟\$_			s	
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·							0,400.00
·			□ \$ _	0	× 5	3,199	
Column Totals		····	□ \$ _	0	× 5	3,199	
Column Totals	D. FEDERAL SIGNATURE of by the undersigned duly authorized for to furnish to the U.S. Securities an	Person. If this notice	se is filed	0	≥ \$199,4 e 505	3,199 00.00 , the fol	9,400.00
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